

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)

SHERMAN FOR CONGRESS

Mailing Address 555 So.Flower St. Suite 4210

City
Los AngelesState
CAZip Code
90071

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Brad Sherman

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 27

Transaction ID: 10096049

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	1

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF LOIS CAPPs

Mailing Address PO Box 23940

City
Santa BarbaraState
CAZip Code
93121

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ms. Lois Capps

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 22

Transaction ID: 10096050

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	1

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

JIM HIMES FOR CONGRESS

Mailing Address 65 HIGH RIDGE ROAD
#456City
STAMFORDState
CTZip Code
06905

Purpose of Disbursement

011

Category/
Type

Candidate Name

JIM HIMES

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CT

District: 04

Transaction ID: 10096051

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)